DOCUMENT RESUME

ED 477 373 UD 035 703

AUTHOR	Delaney, Barbara
TITLE	Partnership for a Drug-Free America: Partnership Attitude Tracking Study. Teens: Ethnic and Racial Trends, Spring 2002.
PUB DATE	2002-00-00
NOTE	25p.; Produced by Partnership for a Drug-Free America.
AVAILABLE FROM	Partnership For A Drug-Free America, 405 Lexington Avenue, Suite 1601, New York, NY 10174. Tel: 212-922-1560; Fax: 212-922-1570; Web site: http://www.drugfreeamerica.org/Home/Default.asp?ws=PDFA&vol=1&grp=Home.
PUB TYPE	Numerical/Quantitative Data (110) -- Reports - Research (143)
EDRS PRICE	EDRS Price MF01/PC02 Plus Postage.
DESCRIPTORS	*Adolescents; Advertising; Alcohol Abuse ; Attitude Measures; Blacks; Crack; Heroin; Hispanic Americans; *Illegal Drug Use; Lysergic Acid Diethylamide; Marijuana; Racial Differences; Smoking; *Substance Abuse; Whites
IDENTIFIERS	Methamphetamines; Risk Taking Behavior

ABSTRACT

The annual Partnership Attitude Tracking Study (PATS) tracks consumers' attitudes about illegal drugs. PATS consists of two nationally projectable samples: a teen sample for students in grades 7-12 and a parent sample. The 2002 PATS, conducted in homes and schools, collected data using self-report surveys. Results indicate that after a decade of rising adolescent drug use, anti-drug attitudes are strengthening, and teen drug use is declining. African American teens are leading the decrease in teen use of marijuana. They also led the increase in teen use of marijuana in the early 1990s. The lower drug use among African American teens is consistent with leading research showing that African American youth have substantially lower rates of use of most licit and illicit drugs than do Whites and Hispanics. Areas of possible concern include the weakening of the perception of risk in inhalant abuse among white teens and the weakening of the perception of risk in heroin use among African American and Hispanic teens. Data are presented on marijuana, ecstacy, cocaine/crack, methamphetamines, inhalants, heroin, LSD, GHB and ketamine, prescription drug abuse, alcohol and cigarette use, general attitudes toward illegal drugs, reasons for use, exposure, intervention/treatment, advertising, sources of information about drug risks, computer use, and discussions with parents. (SM)

Reproductions supplied by EDRS are the best that can be made
from the original document.

ED 477 373

Partnership Attitude Tracking Study

Teens: Ethnic and Racial Trends • Spring 2002

BEST COPY AVAILABLE

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

B. Delaney
Partnership for a Drug-Free America

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

UD 035 703

Mission

Each year in America, millions of children are faced with a decision – a decision about using drugs. Our job is to help children make the right choice.

The Partnership for a Drug-Free America® (PDFA) is a coalition of communications professionals – from advertising, the media industry, public relations, research companies, actors guilds and production companies – dedicated to one mission: *to help kids and teens reject substance abuse by influencing attitudes through persuasive information*. Our mission unfolds primarily in the form of a research-based national advertising campaign, now in its 16th year, created by hundreds of volunteers who comprise the Partnership.

The Partnership for a Drug-Free America® Today

A pioneer in the field of consumer social marketing, the Partnership for a Drug-Free America® (PDFA) is perhaps best known for its national advertising campaign. The Partnership's more than 15 years of experience and its national model have become the foundation on which similar and larger issue-oriented media campaigns have been built.

The Partnership is comprised of a small staff and hundreds of volunteers from the communications industry who create and disseminate the organization's advertising. Advertising agencies create Partnership messages pro bono; talent unions permit their members to work for free; production professionals bring Partnership messages to life; a network of advertising professionals distribute the group's work to national and local media; public relations firms lend services to various Partnership projects; and media companies donate valuable broadcast time and print space to deliver Partnership messages to millions of Americans.

The organization began in 1986 with money provided by the American Association of Advertising Agencies. Today, the Partnership receives major funding from The Robert Wood Johnson Foundation and support from more than 200 corporations and companies. PDFA accepts no funding from manufacturers of alcohol and/or tobacco products. PDFA's first ad appeared in March 1987; the campaign is now the largest public service media campaign in advertising history.

In addition to its work on the national level, the Partnership has helped create 55 state- and city-based versions of its national advertising campaign through its State/City Alliance Program. Working with state/city governments and locally based drug prevention organizations,

the Partnership provides – at no cost – the guidance, on-site technical assistance and creative materials necessary to shape a multimedia campaign tailored to local needs.

The Partnership is a prevention organization. Its messages seek to reinforce behavior among teens and pre-teens that do not use drugs; to prevent drug experimentation and initiation; and to persuade non-addicted users to stop. Messages target kids and parents. Ads created for the Partnership are subject to a rigorous approval process, including review by a panel of behavioral experts, final approval by a committee comprised of some of the best creative directors in the advertising industry and testing for effectiveness with target audiences.

Creating effective anti-drug messages requires talent, passion and dedication. It also requires an understanding of the issue that's firmly grounded in research. The Partnership has the largest body of consumer-based attitudinal research on drugs in the nation. This research provides insights into the minds of young people and helps to ensure our messages will reach and resonate with their intended audiences. Sophisticated consumer research – along with the critically important counsel of our partners in health care, education, government, entertainment and community volunteer organizations across the country – ensure that Partnership ads continue to meet the highest standards of excellence.

(For more information about the Partnership and its programs, download PDFA's latest annual report @ www.drugfreeamerica.org/newscenter. To request a hard copy of the report by mail, call the Partnership's Public Affairs Group @ 212-922-1560.)

The Partnership Attitude Tracking Study

The Partnership Attitude Tracking Study (PATS) is PDFA's unique contribution to the field of substance abuse prevention. An annual study that tracks the elaborate and complex attitudes consumers have about illegal drugs, this research allows us to understand what our target audiences think and feel about various drugs. This consumer-focused, consumer-based research is the largest drug-related attitudinal tracking study in the country. No other organization in the country – commercial, non-profit or governmental – has the rich insights into consumers and drugs that PATS has captured in its 15 installments. The insights gleaned from this study help us develop advertising designed to *unsell* drugs to consumers.

Attitudes drive behavior. According to the University of Michigan's Monitoring the Future study, two critical drug-related attitudes – perception of risk (how risky consumers view a particular drug) and perception of social

disapproval (consumer appeal and acceptance of a particular drug) – move in correlation with consumption. Generally speaking, as consumers come to view drug use as more risky and increasingly disapprove of drugs, consumption declines. Similarly, the opposite holds true.

Understanding the vast dimensions of perceptions of risk and social disapproval provides a look into the consumer mindset on drugs, and offers some insight into the challenges of effectively *unselling* drugs via media communication. It is no easy task. When it comes to drugs and drug taking, consumers define risk in a multitude of ways – physical, emotional, social, aspirational, etc. Specific types of attitudes segment each risk category. The same holds true for social disapproval. Both major categories, and the elaborate array of subcategories and attitudinal measures, are influenced by a multitude of variables – age, gender, race, socio-economic background, geography, peers and other influencers.

Different consumers look at different drugs in different ways. As children pass through childhood into adolescence, for example, their attitudes about drugs – marijuana, cocaine, inhalants, heroin, etc. – change constantly. In addition, teens view trial use of drugs very differently than they view regular use. In developing media messages to speak effectively and persuasively to our target audiences about drugs, we must understand their mindset, their attitudes about drugs. The more we do – and the more our messages acknowledge this reality – the more effective the messages will be.

PATS consists of two nationally projectable samples – a teen sample for students in grades 7 through 12, and a parent sample. The 2002 PATS is the 15th wave of this research conducted since 1987. Prior to 1993, these studies were conducted by interviews in public locations. Since the 1993 study, PATS has been conducted in schools and in homes. Beginning with the 1995 study, the in-home study was conducted with parents of children under the age of 19, and data from that sample are projected accordingly. Since 1993 RoperASW, Inc., a leading market research company, has conducted the studies for PDFA. PATS is funded, in part, by an organizational grant from The Robert Wood Johnson Foundation. In the 2002 PATS teens' study, 7,084 adolescents nationwide were surveyed. The margin of error for the sample is +/–1.5 percent.

The data in this report were collected from April through June 2002. Adolescents in grades 7 through 12 were questioned with an over sampling of African- and Hispanic-American populations. Adolescents completed self-administered questionnaires under the supervision of RoperASW's interviewers. The anonymity of all respondents was maintained

throughout the study. Significant differences on charts and graphs in this report are indicated only for 2002 results versus and 2001, unless otherwise noted. Significant differences are noted with an asterisk (*).

Self-Report Data

PATS is based on self-reported data. Surveys based on self-reported data collection represent the dominant methodology used in the marketplace. Many academic/government institutions use self-reporting data when researching sensitive issues, i.e., Centers for Disease Control (Youth-At-Risk), University of Michigan (Monitoring the Future study), the U.S. Department of Health and Human Services (National Household Survey on Drug Use).

Race/Ethnicity Analysis

The following is an analysis from PATS of teens' attitudes and behavior segmented by their race/ethnicity. According to Behavioral Change Experts, the mental and emotional developments of teens are the same regardless of race or ethnicity. However, they point out that the socio-economic, cultural and ethnic background of racial and ethnic groups influences the values, beliefs, and lifestyles of members of these groups.

According to leading researchers, very interesting differences in adolescent drug use are found among the three largest racial/ethnic groups - Whites, African Americans, and Hispanics. "Contrary to popular assumption, at all three grade levels African American youngsters have substantially lower rates of use of most licit and illicit drugs than do Whites." [1]Hispanics have rates of use that tend to be similar or higher than White teens.

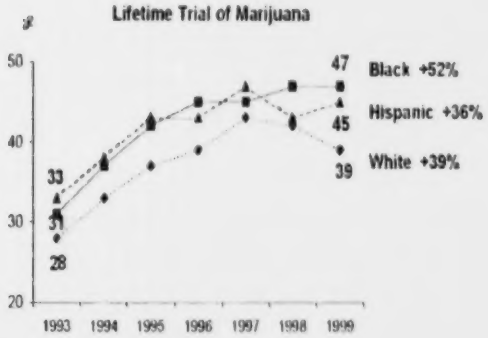
The following analysis of the 2002 PATS confirms these findings – African American teens have stronger anti-drug attitudes and lower rates of use of substance abuse than do White or Hispanic teens. Hispanic rates of use are similar or higher than White teens.

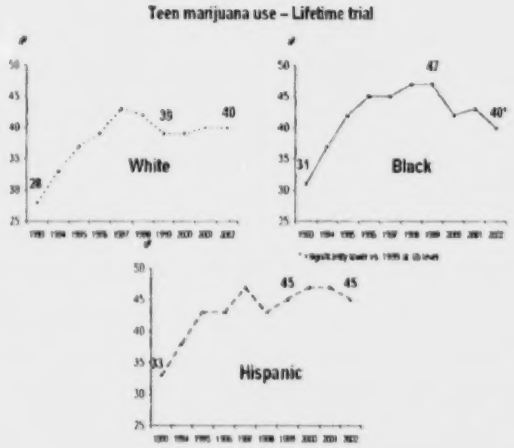
Marijuana

After a decade of rising adolescent drug use among our nation's children, the results of the Partnership for a Drug-Free America's annual survey of students in grades 7 through 12 provide a reason to be optimistic about the future. Anti-drug attitudes are strengthening and drug use among teens is declining.

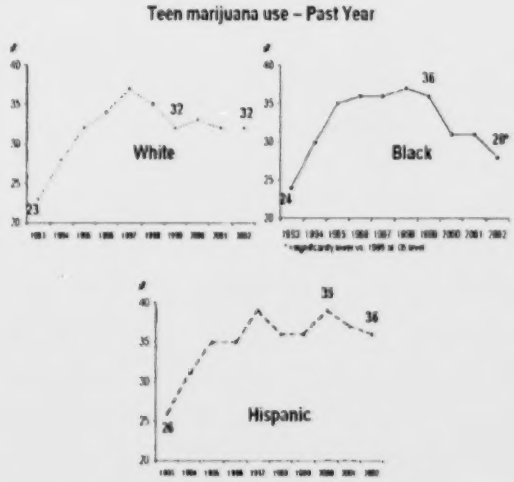
[1] Johnston, L.D., O'Malley, P.M., & Bachman, J.G. (2002). Monitoring the Future National Results on Adolescent Drug Use: Overview of Key Findings, 2002. Bethesda, MD: National Institute on Drug Abuse, p. 39.

During the 1990's marijuana use significantly increased among African American teens – by 1999 trial of marijuana was significantly higher than White teens and equal to Hispanic teens.





However since 1999, trial of marijuana significantly decreased among African American teens (47 percent lifetime trial in 1999 to 40 percent in 2002). At the same time, trial of marijuana among Whites (39 percent in 1999 to 40 percent in 2002) and Hispanics (45 percent in 1999 and 2002) held steady. A similar pattern holds for past year use of marijuana – significant decrease among African Americans and stable levels for Whites and Hispanics.



BEST COPY AVAILABLE

Popular culture has a profound effect on adolescents. In the early to mid-1990s, music, movies, and fashion propelled marijuana into teens' lives, resembling the appearance of a cultural fad. Although marijuana has been

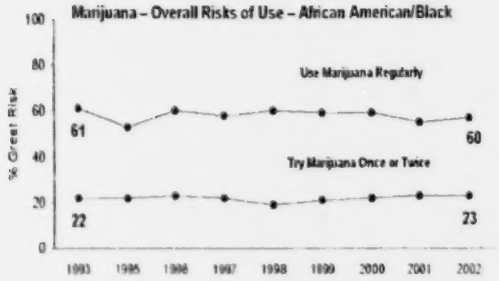
around for years, for this new cohort, there existed what Lloyd Johnston of the University of Michigan's Institute for Social Research calls "generational forgetting" – "the loss of knowledge by the country's youth of the dangers of drugs through the process of generational replacement" (Johnston et al., 2001, p.35). This means that 8th-graders in the early 1990s did not have the familiarity with marijuana that older cohorts had. Because marijuana does not have the immediate and severe effects of a drug such as heroin, these young people's perceptions of the risk in marijuana use were low, especially after trying the drug only once or twice. Marijuana use increased significantly in a very short period of time.

According to child development experts, the major task of the teen years is achieving an identity. Much of teen behavior, therefore, is an attempt to answer the question, "Who am I really?" Teens create a self through clothing, hair, music, group identification, and not political or social ideas. This self is often fluid and changing. For teens, buying things means surrounding the self with objects that help to define an identity. These objects bolster their confidence almost like a security blanket for a child.

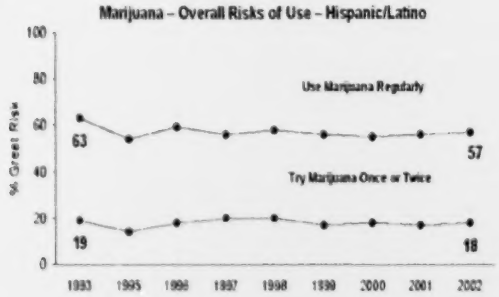
Teens express their need for autonomy through experimentation and risk taking (verbal risk taking: swearing, talking back, challenging, manipulating; behavior risk taking: drugs, dress, not doing what they're told; attitudinal risk taking: adopting provocative beliefs, withdrawal, argumentativeness). They express their need for autonomy through role playing: trying on new identities (handshakes, voices, clothes, hairstyles, handwriting, speech patterns, language) and also through selective identification and incorporation: patterning one's behavior, appearance and beliefs on role models – selected authority figures, music, TV, movies, sports.

Music, fashion, appearance, and behavior become the outward signs that teens use to assert their unique selves; these signs become their badges of identity. In the early and mid-1990s, drugs, especially marijuana, had a cachet as a badge of identity. Cultural icons – especially musicians and actors – were seen as purveyors of marijuana or drug "coolness."

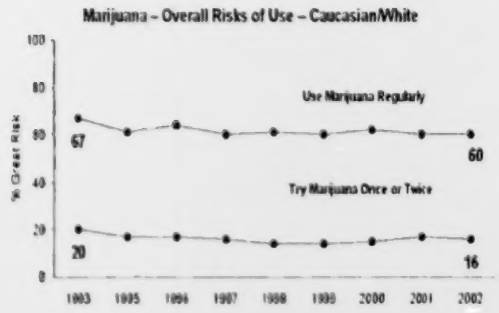
Overall perception of risk in marijuana trial and use did not change versus 2001. However, consistent with the lower usage rates, African American teens (23 percent great risk) have a



higher perception of risk of marijuana trial than do Hispanic teens (18 percent great risk).



African American teens also have a greater perception of risk of marijuana trial than do White teens (16 percent great risk).



Teens define risk in a multitude of ways -- possible physical effects of use, emotional problems that may be related to use, disruption of family/friend relationships, and negative consequences of using a drug that could interfere with their aspirations and dreams, both short-term and long-term. Most relational risks of marijuana use (*upsetting parents, losing respect of family and friends, losing friends, letting other people down, not being able to get a girl or boyfriend*) did not change among the groups.

In 2002 there were positive changes among all three groups in terms of perceived aspirational risks versus 2001: White teens were significantly more likely to feel that there is a great risk of *not getting a job because of pre-employment drug testing* (62 percent in 2001 vs. 67 percent in 2002), *messing up their lives* (63 percent in 2001 vs. 67 percent in 2002), *becoming a dealer* (43 percent in 2001 vs. 54 percent in 2002).

Marijuana – Aspirational Risks – Caucasian/White

% Great Risk	2000	2001	2002
Wasting money	73	73	73
Not getting a job because of pre-employment drug testing	65	62	67*
Getting in trouble with the law	67	67	67
Messing up their lives	66	63	67*
Dropping out of school	58	56	57
Losing their driver's license	58	58	59
Missing out on the good things in life	57	56	58
Not getting into a good college	57	53	56
Becoming a dealer	45	43	54*
Doing worse at school or sports	54	52	55

*[illegible] vs. 2001 at 95% level

Black teens were significantly more likely to believe that there is a great risk of *not getting a job because of pre-employment drug testing* (63 percent in 2001 vs. 70 percent in 2002) and *becoming a dealer* (52 percent in 2001 vs. 58 percent in 2002).

Marijuana – Aspirational Risks – African American/Black

% Great Risk	2000	2001	2002
Wasting money	67	62	65
Not getting a job because of pre-employment drug testing	67	63	70*
Getting in trouble with the law	71	67	67
Messing up their lives	66	62	65
Dropping out of school	63	59	61
Losing their driver's license	55	53	54
Missing out on the good things in life	57	52	56
Not getting into a good college	58	56	56
Becoming a dealer	50	52	58*
Doing worse at school or sports	54	51	53

*significant vs. 2001 at .05 level

Hispanic teens were also more likely to believe that there is a great risk of *becoming a dealer* (51 percent in 2001 vs. 58 percent in 2002) if you use marijuana. This increase in the risk perception of *becoming a dealer* may be related to an increase of their peers and friends selling marijuana.

Marijuana – Aspirational Risks – Hispanic/Latino

% Great Risk	2000	2001	2002
Wasting money	61	66	67
Not getting a job because of pre-employment drug testing	60	66	69
Getting in trouble with the law	65	70	67
Messing up their lives	62	66	68
Dropping out of school	58	62	63
Losing their driver's license	58	57	56
Missing out on the good things in life	57	57	57
Not getting into a good college	57	54	58
Becoming a dealer	45	51	58*
Doing worse at school or sports	54	53	55

*significant vs. 2001 at .05 level

There were no changes in 2002 in perceived emotional risks of using marijuana among all three groups. There were also no changes in perceived physical risks in using marijuana among White, Hispanic, or African American teens.

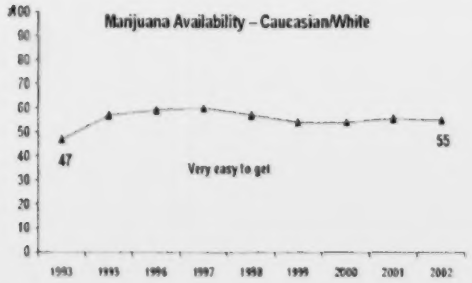
There were no major changes in perceptions of the social acceptability of marijuana among all teens (*it seems like marijuana is everywhere these days, most people will try marijuana sometimes, it should be OK for someone over 21 to smoke marijuana in private, in my school most teens don't smoke marijuana, smoking marijuana is OK sometimes, in my school marijuana users are popular, the coolest kids smoke marijuana*). This includes both the greater adult-world social acceptability and the more immediate school environment.

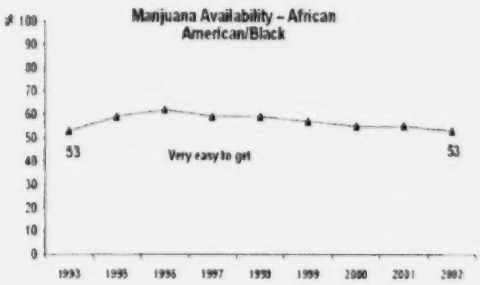
Most teens do not feel that they lack the ability to refuse marijuana, even if the person offering was a friend - roughly one out of ten teens agrees

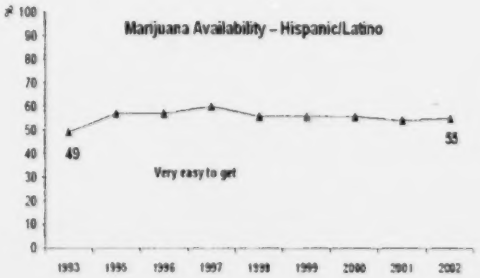
strongly that it's *hard to say no when friends want you to try marijuana*. There were no differences by ethnicity.

Interestingly there have been changes in the slang terms for marijuana among White and African American teens. The leading slang term continues to be "weed." However, White teens were more likely in 2002 (69 percent) than in 2001 (65 percent) to refer to marijuana, as "blunts" and African American teens were more likely in 2002 (62 percent) than in 2001 (55 percent) to refer to it as "pot." This may be a result of the "mainstreaming" of marijuana – African American teens being more exposed to a "white" slang term and White teens being more exposed to a "black" slang term.

Compared to 2001, there were no changes in perceived availability of marijuana among any of the groups.



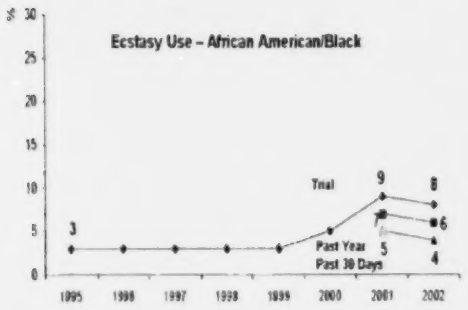


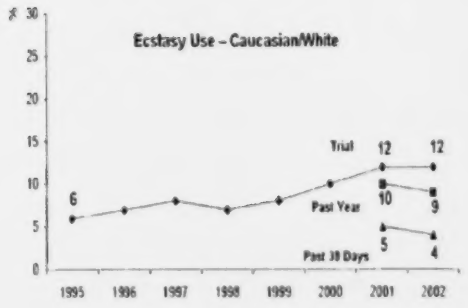


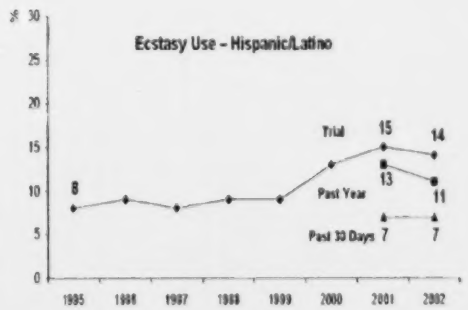
Similarly, exposure through friends' and family use did not change in 2002 versus 2001.

Ecstasy

African American teens (8 percent) are significantly less likely than White (12 percent) or Hispanic teens (14 percent) to try Ecstasy.







There are indications of positive movement among White teens – perception of risk in regular use of Ecstasy significantly increased among White teens from 2001 (75 percent great risk) to 2002 (79 percent great risk). In addition, among White teens, some specific risks significantly increased: *getting hooked on Ecstasy* (79 percent in 2002 vs. 74 percent in 2001), *long term brain damage* (78 percent in 2002 vs. 74 percent in 2001), and *getting depressed* (57 percent in 2002 vs. 52 percent in 2001).

Ecstasy – Specific Risks - Caucasian/White

% Great Risk	2001	2002
Getting hooked on Ecstasy	74	79*
Long term brain damage	74	78*
Dying	73	75
Memory problems	68	71
Needing Ecstasy to have a good time on weekends	NA	70
Getting depressed	52	57*

*significant vs. 2001 at .05 level

Among African American teens, the risk of *memory problems* (68 percent in 2002 vs. 62 percent in 2001) significantly increased.

Ecstasy – Specific Risks - African American/Black

% Great Risk	2001	2002
Getting hooked on Ecstasy	70	75
Long term brain damage	71	74
Dying	71	75
Memory problems	62	68*
Needing Ecstasy to have a good time on weekends	NA	67
Getting depressed	48	54

*significant vs. 2001 at .05 level

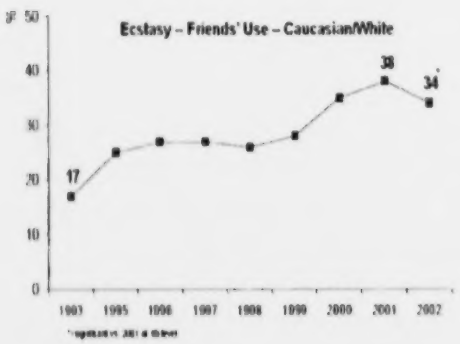
Unfortunately, there were no changes among Hispanic youth in terms of perceived risk.

BEST COPY AVAILABLE

Ecstasy – Specific Risks - Hispanic/Latino

% Great Risk	2001	2002
Getting hooked on Ecstasy	72	74
Long term brain damage	72	74
Dying	73	75
Memory problems	66	68
Needing Ecstasy to have a good time on weekends	NA	68
Getting depressed	47	50

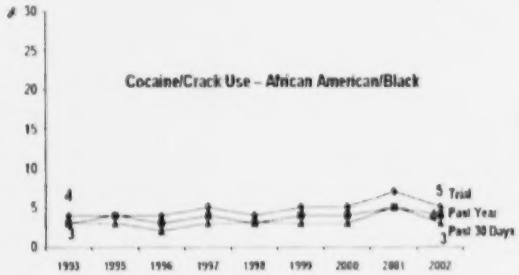
Another positive movement was a significant decrease in the percent of White teens (38 percent in 2001 to 34 percent in 2002) that say that their friends use Ecstasy.

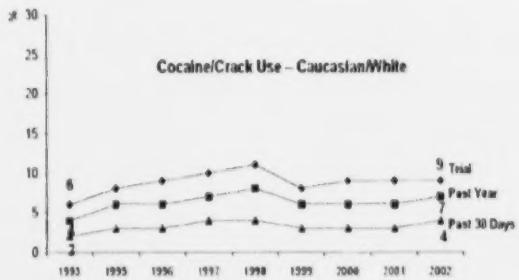


Perceived availability of Ecstasy did not change among any of the groups from 2001 to 2002.

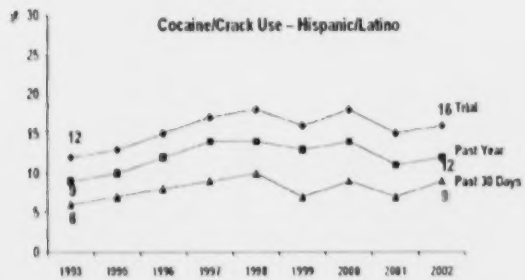
Cocaine/crack

African American teens (5 percent) are significantly less likely to try cocaine/crack than are White (9 percent) and Hispanic teens (16 percent).



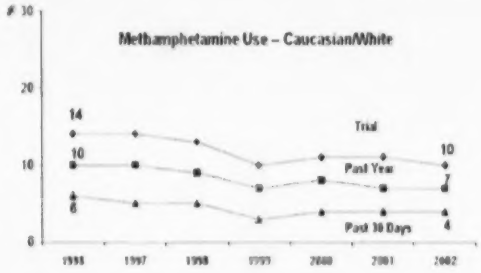


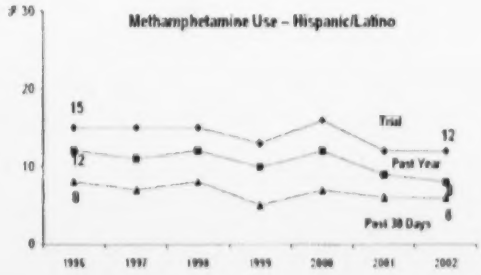
White teens are also significantly less likely to try the drugs than are Hispanic teens.



Corresponding to the lower prevalence rate, African American teens (57 percent) are significantly more likely to perceive a great risk in cocaine/crack trial than either White (49 percent) or Hispanic teens (46 percent). African

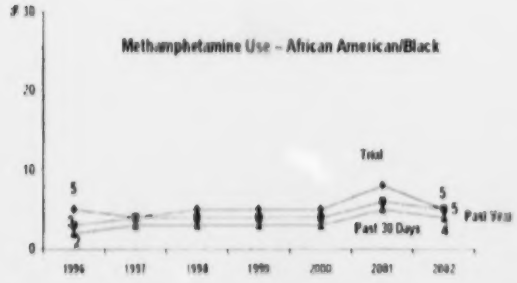
American teens (18 percent) are also less likely than White (30 percent) or Hispanic teens (38 percent) to have friends that use cocaine/crack occasionally. Specific risks of cocaine/crack use, *getting hooked, dying, doing worse at school, work or sports, getting depressed, losing their friends*, remained stable from 2001 to 2002 among all groups. African American teens in 2002 were significantly more likely to see a great risk in *becoming a dealer* (64 percent in 2002 vs. 56 percent in 2001) if someone uses cocaine/crack. African American teens were also less likely in 2002 to believe that cocaine/crack would be *very easy to get* (25 percent in 2001 to 20 percent in 2002).





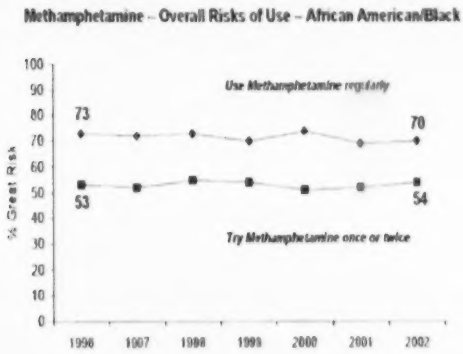
Methamphetamine

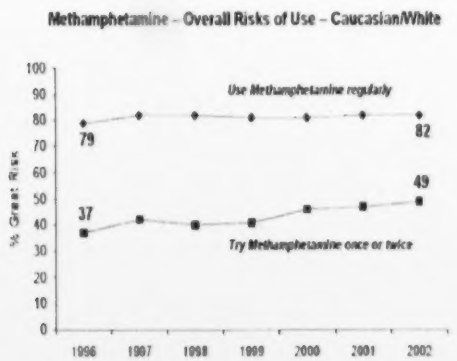
Similar to cocaine/crack, African American teens (5 percent) are significantly less likely to try methamphetamine than are White (10 percent) or Hispanic teens (12 percent).

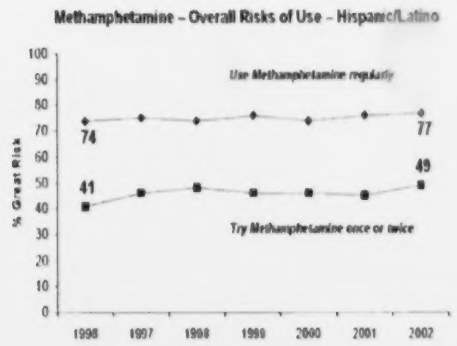


They (15 percent) are also significantly less likely White (28 percent) or Hispanic teens (30 percent) to have friends that use methamphetamine.

Consistent with the lower prevalence rates, while not significant, African American teens (54 percent) are more likely than White (49 percent) or Hispanic teens (49 percent) to see a great risk in trying methamphetamine once or twice.



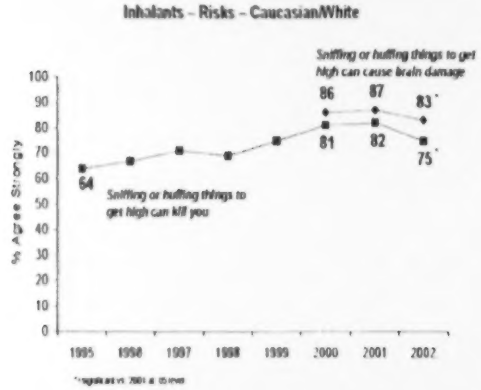


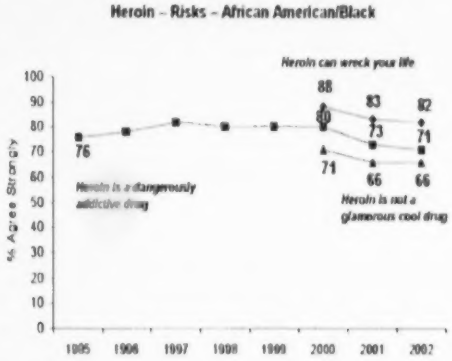


African American teens were significantly more likely in 2002 than in 2001 to believe there is a great risk in *dropping out of school* (70 percent vs. 64 percent) and *getting depressed* (62 percent vs. 54 percent) if someone uses methamphetamine. There were no changes among White or Hispanic teens in specific perceived risks of methamphetamine use.

Inhalants

Inhalant abuse indicators (trial, past year, past month) remained stable in 2002 versus 2001. Perceived friends' abuse of inhalants also remained stable. However, there are major indications of a weakening of perception of risk in inhalant abuse among White teens – in 2002 they are significantly less likely to agree strongly that *sniffing or huffing things to get high can cause brain damage* (83 percent in 2002 vs. 87 percent in 2001) or that *sniffing or huffing things to get high can kill you* (75 percent in 2002 vs. 82 percent in 2001).



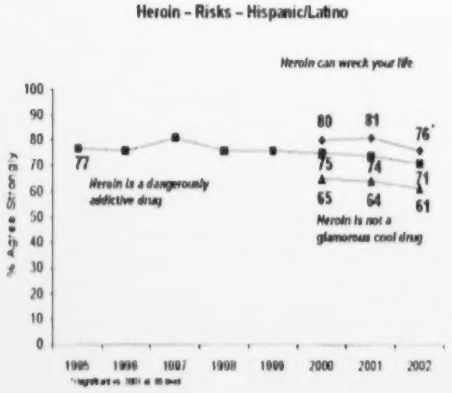


This should be closely monitored because a weakening of attitudes indicates the possibility of increased future abuse.

Heroin

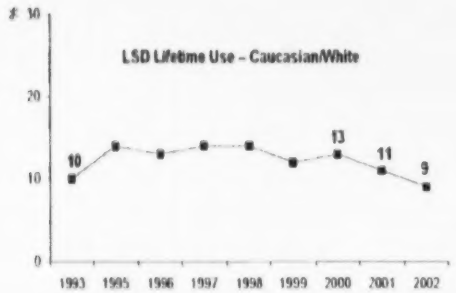
Teens' trial of heroin continues to remain relatively low. Friends' use of the drug remained stable.

Although perceptions of risk remained generally stable, there are indications of possible weakening of attitudes, especially among African American and Hispanic teens.

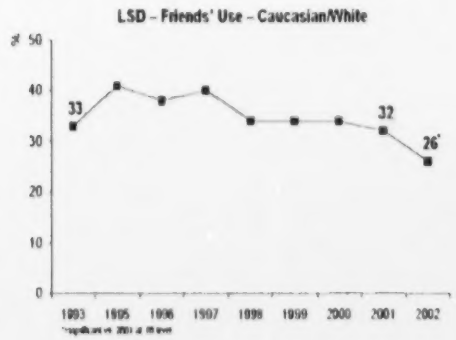


LSD

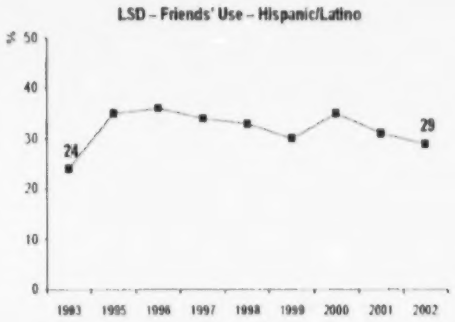
Although not significant versus 2001 there has been a significant decrease in LSD trial among White teens versus 2000 (9 percent in 2002 vs. 13 percent in 2000).

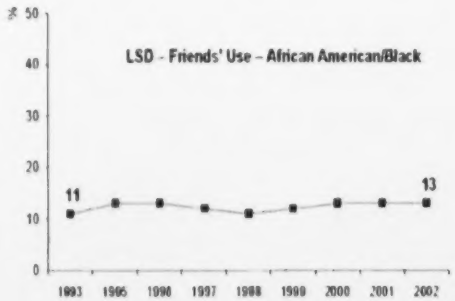


There was a significant decrease in White teens' friends' trial of LSD (26 percent in 2002 vs. 32 percent in 2001).



African American teens(13 percent) are less likely to have friends that use LSD than are White (26 percent) and Hispanic teens (29 percent); and they (4 percent) are also less likely to try the drug than are White (9 percent) and Hispanic teens (10 percent).



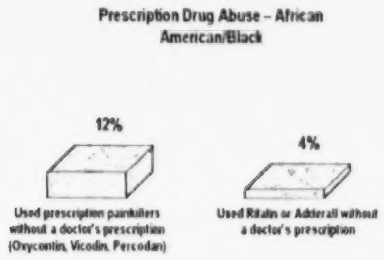


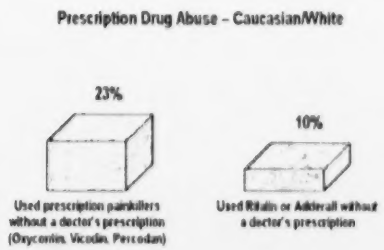
GHB and Ketamine

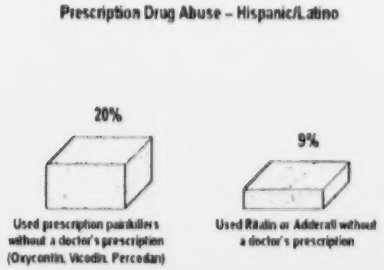
From 2001 to 2002 there were no changes in trial of these drugs among any group.

Prescription Drug Abuse

African American teens are significantly less likely to abuse prescription drugs than are White or Hispanic teens.

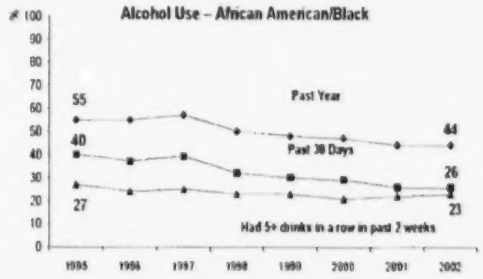

Prescription Drug Abuse – African American/Black
12%
Used prescription painkillers without a doctor's prescription (Oxycontin, Vicodin, Percodan)
4%
Used Ritalin or Adderall without a doctor's prescription

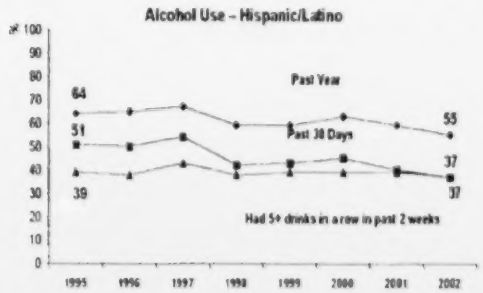

Prescription Drug Abuse – Caucasian/White
23%
Used prescription painkillers without a doctor's prescription (Oxycontin, Vicodin, Percodan)
10%
Used Ritalin or Adderall without a doctor's prescription

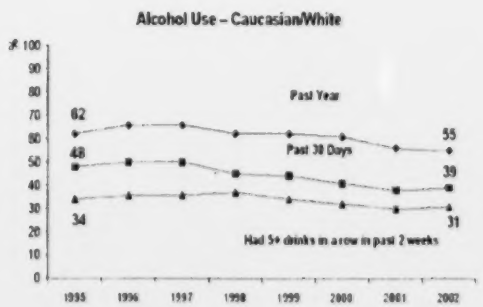

Prescription Drug Abuse – Hispanic/Latino
20%
Used prescription painkillers without a doctor's prescription (Oxycontin, Vicodin, Percodan)
9%
Used Ritalin or Adderall without a doctor's prescription

Alcohol and Cigarette Use

There was no change in alcohol use versus 2001 among any of the groups. African Americans (26 percent used in the past month) are significantly less likely than Hispanic (37 percent) or White teens (39 percent) to use alcohol.

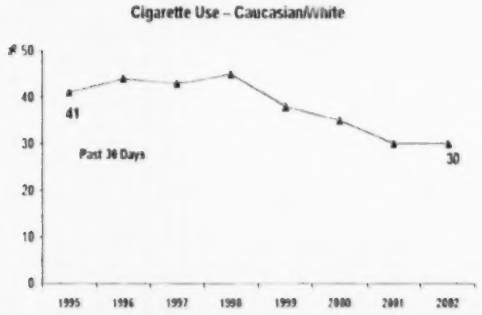


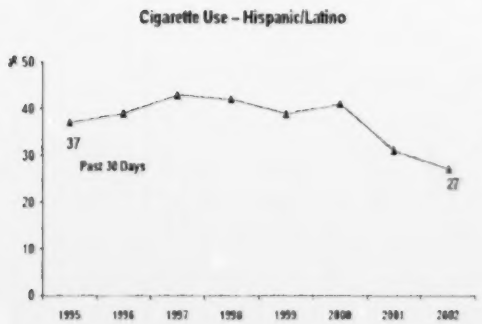


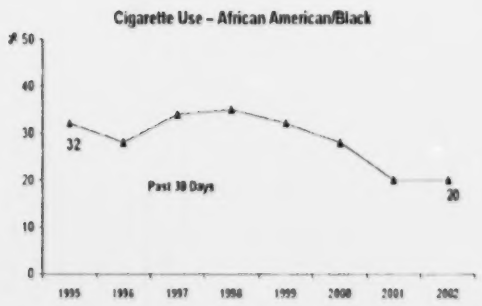


Versus 2000 all groups showed a significant decrease in cigarette use. African American teens (20 percent) are significantly less likely than

Hispanic (27 percent) or White teens (30 percent) to smoke cigarettes.







General Attitudes Toward Illegal Drugs

Compared to 2001 there were no significant differences in general attitudes toward drugs among White, African American, or Hispanic teens: (*I don't want to hang around drug users, Taking drugs scares me, Kids who are really cool don't use drugs*).

Most Harmful Drug

White and Hispanic teens have a more polarized ranking system of the most harmful drugs – heroin leads all other drugs.

Most Physically Harmful Drug – Ranked # 1
Caucasian/White

	2002
Heroin	31
Ecstasy	13
Crack	7
Methamphetamine	9
Cocaine	7
LSD	7
Marijuana	7
Inhalants	6

Most Physically Harmful Drug – Ranked # 1
Hispanic/Latino

	2002
Heroin	24
Ecstasy	9
Crack	8
Methamphetamine	10
Cocaine	8
LSD	6
Marijuana	8
Inhalants	7

BEST COPY AVAILABLE

While African American teens rank heroin number 1, their ranking is more uniform.

Most Physically Harmful Drug – Ranked # 1
African American/Black

	2002
Heroin	18
Ecstasy	11
Crack	16
Methamphetamine	8
Cocaine	9
LSD	6
Marijuana	6
Inhalants	4

Reasons for Use

All teens are in general agreement about why they think teens use drugs. From 2001 to 2002, White teens were significantly less likely to agree that *parties are more fun with drugs* (31 percent in 20002 vs. 36 percent in 2001) and African American teens were significantly less likely to agree that *drug users feel adventurous* (44 percent in 2002 vs. 51 percent in 2001).

Reasons For Using Drugs – Caucasian/White

% Agree Strongly/Somewhat	2000	2001	2002
Kids use drugs to look cool	64	59	62
Drug users feel adventurous	56	54	51
Marijuana helps you relax	51	51	49
Being high feels good	47	49	46
Drugs help you forget your troubles	44	44	42
Drugs help you relax socially	45	45	43
Drugs help kids when they're having a hard time	34	35	32
Drugs are fun	36	37	34
Parties are more fun with drugs	34	36	31*
It's OK to sell drugs to make money	17	17	16

Reasons For Using Drugs – African American/Black

% Agree Strongly/Somewhat	2000	2001	2002
Kids use drugs to look cool	63	59	60
Drug users feel adventurous	53	51	44*
Marijuana helps you relax	41	40	38
Being high feels good	39	38	37
Drugs help you forget your troubles	39	36	39
Drugs help you relax socially	34	33	33
Drugs help kids when they're having a hard time	31	31	29
Drugs are fun	18	17	18
Parties are more fun with drugs	23	20	20
It's OK to sell drugs to make money	27	29	30

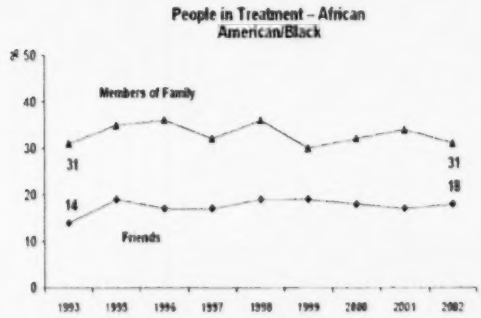
Exposure

There were no changes in exposure - *anyone selling or trying to give them drugs* - from 2001 to 2002. There were also no changes in perceptions of popular culture and drugs (i.e., *many rock or rap stars make drug use look tempting, movies and TV shows make drugs seem like an ok thing to do, music that kids listen to makes marijuana seem cool*) from 2001 to 2002 among any of the groups.

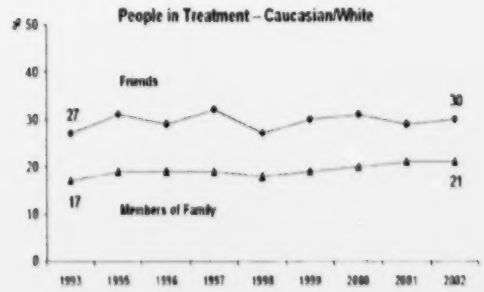
Intervention and Treatment

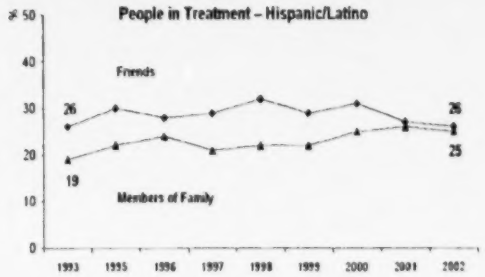
There were no changes in teens' intentions to intervene with a friend who is using drug and also no change in actual behavior (i.e., *tried to talk a friend out of using drugs, friend tried to talk you out of using drug, tried to talk brother/sister out of using drugs, brother/sister tried to talk you out of using drugs*).

African American teens (31 percent family vs. 18 percent friends) are more likely to have family members in treatment than friends.



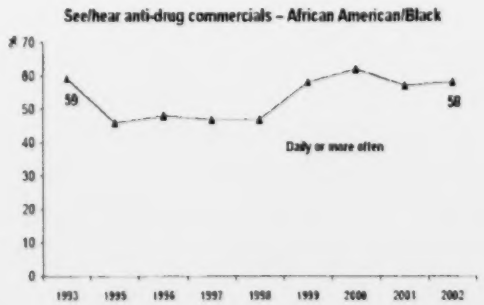
In contrast, White teens (21 percent family vs. 30 percent friends) are more likely to have friends in treatment than family. Hispanic teens (25 percent family vs. 26 percent friends) are approximately equal.

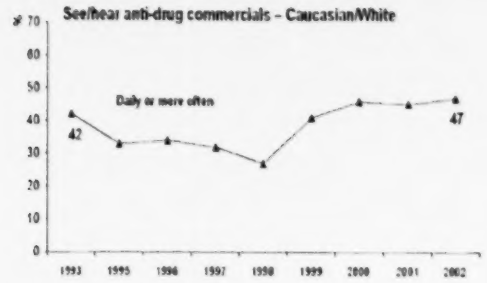


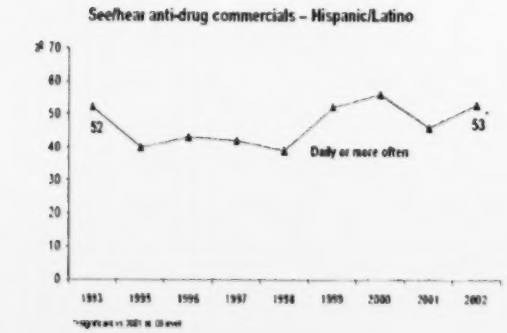


Advertising

Compared to 2001 awareness of anti-drug messages remains stable among all groups. Approximately half of all teens reported that they see/hear anti-drug commercials daily or more often. African American teens (58 percent) report the highest exposure, White teens (47 percent) and Hispanic teens (53 percent).







There were significant increases among White and African American teens' ratings of effectiveness. Both were significantly more likely in 2002 than in 2001 to agree a lot that the ads *taught them about the risks of using drugs* (White 39 percent in 2002 vs. 34 percent in 2001, African American 59 percent in 2002 vs. 53 percent in 2001) and *gave them new information or told them things they didn't know about drugs* (White 39 percent in 2002 vs. 32 percent in 2001, African American 56 percent in 2002 vs. 48 percent in 2001). African American teens are more likely than White or Hispanic teens to consider the advertising effective.

Effects of Anti-Drug Messages – Caucasian/White

% Agree a lot	1993	1995	1996	1997	1998	1999	2000	2001	2002
Taught you about the risks of using drugs	35	31	30	28	28	31	35	34	39*
Given you new information or told you things you didn't know about drugs	35	29	29	27	26	29	34	32	39*
Made you less likely to try or use drugs	40	31	30	27	28	30	35	33	38
Encouraged you to talk to someone else about the risks of drugs	24	23	20	20	21	21	25	25	27

Effects of Anti-Drug Messages – African American/Black

% Agree a lot	1993	1995	1996	1997	1998	1999	2000	2001	2002
Taught you about the risks of using drugs	54	47	48	48	46	50	52	53	59*
Given you new information or told you things you didn't know about drugs	49	45	44	43	46	48	47	48	56*
Made you less likely to try or use drugs	55	45	45	44	43	50	49	48	52
Encouraged you to talk to someone else about the risks of drugs	41	36	33	36	38	39	39	40	41

Effects of Anti-Drug Messages – Hispanic/Latino

% Agree a lot	1993	1995	1996	1997	1998	1999	2000	2001	2002
Taught you about the risks of using drugs	49	41	40	38	39	41	44	45	47
Given you new information or told you things you didn't know about drugs	42	35	39	38	39	38	38	41	44
Made you less likely to try or use drugs	46	34	38	34	37	38	40	39	40
Encouraged you to talk to someone else about the risks of drugs	37	30	31	32	32	32	33	34	33

Sources of Information about the Risks of Drugs

TV commercials as a source of information about the risks of drugs significantly increased from 2001 to 2002 among White (20 percent to 26 percent) and Hispanic (26 percent to 32 percent) teens.

BEST COPY AVAILABLE

Sources of Information – Caucasian/White

% Learned a lot about risks of drugs from...	2000	2001	2002
School lessons or programs	43	44	43
Friends	30	30	32
Parents or Grandparents	26	27	27
TV shows, news, or movies	25	24	26
TV commercials	22	20	26*
School posters	18	17	16
The Internet	15	18	20
On the street	17	17	17
Print ads in newspapers or magazines	13	15	15

Sources of Information – African American/Black

% Learned a lot about risks of drugs from...	2000	2001	2002
School lessons or programs	46	47	47
Friends	24	30	32
Parents or Grandparents	40	45	46
TV shows, news, or movies	41	41	44
TV commercials	38	40	44
School posters	28	28	33
The Internet	21	28	30
On the street	30	32	32
Print ads in newspapers or magazines	23	28	29

Sources of Information – Hispanic/Latino

% Learned a lot about risks of drugs from...	2000	2001	2002
School lessons or programs	45	47	46
Friends	33	33	35
Parents or Grandparents	34	33	37
TV shows, news, or movies	35	32	34
TV commercials	31	26	32*
School posters	26	25	26
The Internet	23	26	28
On the street	26	25	25
Print ads in newspapers or magazines	21	22	21

Among African American teens, TV commercials did not significantly increase from 2001 to 2002 (40 percent to 44 percent) as a source of information; however African Americans are more likely than either White or Hispanic teens to consider TV commercials as a source of information about the risks of drugs.

Computer Use

The majority of teens uses a computer at home and spends time on the Internet for 1 or more hours each week. White (72 percent) teens are significantly more likely than African American (59 percent) or Hispanic (60 percent) teens to use a computer at home.

Computer Use – Caucasian/White

%	1998	1999	2000	2001	2002
Use a computer at home for 1 or more hours each week	49	60	67	72	72
Use a computer at school for 1 or more hours each week	35	36	40	37	42*
Use a computer at some other place for 1 or more hours each week	20	21	26	24	27
Spend time on the Internet for 1 or more hours each week	41	55	63	67	67

Use of a computer at school is approximately equal for all groups – White (42 percent), African American (43 percent), Hispanic (39 percent).

BEST COPY AVAILABLE

Computer Use – African American/Black

%	1998	1999	2000	2001	2002
Use a computer at home for 1 or more hours each week	33	43	50	54	59
Use a computer at school for 1 or more hours each week	32	36	41	38	43
Use a computer at some other place for 1 or more hours each week	28	32	34	37	38
Spend time on the Internet for 1 or more hours each week	31	44	54	60	62

Computer Use – Hispanic/Latino

%	1998	1999	2000	2001	2002
Use a computer at home for 1 or more hours each week	34	42	49	58	60
Use a computer at school for 1 or more hours each week	34	37	37	36	39
Use a computer at some other place for 1 or more hours each week	27	27	32	30	34
Spend time on the Internet for 1 or more hours each week	36	44	52	61	62

Discussions with Parents

From 2001 to 2002 there were no change in frequency of parental discussions about drugs. Twenty-three percent of White teens report that their parents discussed drugs with them four or more times in the past year. This compares to 32 percent African American teens and 30 percent of Hispanics that have had similar conversations.

Frequency of Parents/Grandparents talking about Drugs in Past Year – Caucasian/White

%	2000	2001	2002
Spoke (net)	67	68	69
4+ times	21	23	23
2-3 times	26	25	27
1 time	20	20	19
Never	32	31	30

Frequency of Parents/Grandparents talking about Drugs in Past Year – Hispanic/Latino

%	2000	2001	2002
Spoke (net)	74	74	73
4+ times	33	28	30
2-3 times	23	26	25
1 time	18	20	18
Never	25	26	25

Frequency of Parents/Grandparents talking about Drugs in Past Year – African American/Black

%	2000	2001	2002
Spoke (net)	64	66	67
4+ times	29	31	32
2-3 times	21	18	18
1 time	14	17	17
Never	33	32	32

BEST COPY AVAILABLE

Summary

The Partnership's 2002 Attitude Tracking Study indicates that African American teens are leading the decrease in teen use of marijuana. This is extremely interesting because they also led the increase in teen use of marijuana in the early 1990s. The lower drug use among African American teens is consistent with leading research that shows that African American youth have substantially lower rates of use of most licit and illicit drugs than do Whites and Hispanics. What was inconsistent was the steep increase in African American teen use of marijuana in the early 1990s. These findings raise questions about the relationship of popular culture and teen attitudes and substance abuse. It would be an over simplification to state that popular culture was totally responsible for the increase in use. However, there is a need to better understand the interaction of popular culture and teens' desire to establish a sense of identify and how this relates to their identification with cultural icons (musicians and actors).

These findings indicate that there are "beacons" of possible concern: the weakening of the perception of risk in inhalant abuse among White teens and the weakening of the perception of risk in heroin use among African American and Hispanic teens. While not conclusive proof that there will be an increase in use, these should be closely monitored because a weakening of attitudes indicates the possibility of increase future abuse.

These findings also indicate the public health anti-drug advertising continues to be an efficient and effective means to reach White, African American, and Hispanic teens with persuasive information on the risks of drugs.

U.S. Department of Education
Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)

REPRODUCTION RELEASE

(Specific Document)

UD 035703

I. DOCUMENT IDENTIFICATION:

Title: Partnership for a Drug-Free America Partnership Attitude Tracking Study: Teens: Ethnic and Racial Trends 2002	
Author(s): Barbara Delaney	
Corporate Source: Partnership for a Drug-Free America	Publication Date: Spring 2002

II. REPRODUCTION RELEASE:

In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, *Resources in Education* (RIE), are usually made available to users in microfiche, reproduced paper copy, and electronic media, and sold through the ERIC Document Reproduction Service (EDRS). Credit is given to the source of each document, and, if reproduction release is granted, one of the following notices is affixed to the document.

If permission is granted to reproduce and disseminate the identified document, please CHECK ONE of the following three options and sign at the bottom of the page.

The sample sticker shown below will be affixed to all Level 1 documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

Level 1

☑

Check here for Level 1 release, permitting reproduction and dissemination in microfiche or other ERIC archival media (e.g., electronic) and paper copy.

The sample sticker shown below will be affixed to all Level 2A documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE, AND IN ELECTRONIC MEDIA FOR ERIC COLLECTION SUBSCRIBERS ONLY, HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2A

Level 2A

☐

Check here for Level 2A release, permitting reproduction and dissemination in microfiche and in electronic media for ERIC archival collection subscribers only

The sample sticker shown below will be affixed to all Level 2B documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE ONLY HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2B

Level 2B

☐

Check here for Level 2B release, permitting reproduction and dissemination in microfiche only

Documents will be processed as indicated provided reproduction quality permits.
If permission to reproduce is granted, but no box is checked, documents will be processed at Level 1.

I hereby grant to the Educational Resources Information Center (ERIC) nonexclusive permission to reproduce and disseminate this document as indicated above. Reproduction from the ERIC microfiche or electronic media by persons other than ERIC employees and its system contractors requires permission from the copyright holder. Exception is made for non-profit reproduction by libraries and other service agencies to satisfy information needs of educators in response to discrete inquiries.

Sign here, please

Signature: Barbara Delaney	Printed Name/Position/Title: Barbara Delaney Director of Research
Organization/Address: Partnership for a Drug-Free America 405 Lexington Ave. NY NY 10174	Telephone: 212-973-3509 FAX: 212-922-1578
	E-Mail Address: barbara_delaney@drug-free.org Date: 6/9/03

(over)

III. DOCUMENT AVAILABILITY INFORMATION (FROM NON-ERIC SOURCE):

If permission to reproduce is not granted to ERIC, *or*, if you wish ERIC to cite the availability of the document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents that cannot be made available through EDRS.)

Publisher/Distributor:
Address:
Price:

IV. REFERRAL OF ERIC TO COPYRIGHT/REPRODUCTION RIGHTS HOLDER:

If the right to grant this reproduction release is held by someone other than the addressee, please provide the appropriate name and address:

Name:
Address:

V. WHERE TO SEND THIS FORM:

Send this form to the following ERIC Clearinghouse:

ERIC Clearinghouse on Urban Education
Box 40, Teachers College, Columbia University
New York, NY 10027

Telephone: 212-678-3433
Toll Free: 800-601-4868
Fax: 212-678-4012

WWW: http://eric-web.tc.columbia.edu

However, if solicited by the ERIC Facility, or if making an unsolicited contribution to ERIC, return this form (and the document being contributed) to:

ERIC Processing and Reference Facility
4483-A Forbes Boulevard
Lanham, Maryland 20706

Telephone: 301-552-4200
Toll Free: 800-799-3742
FAX: 301-552-4700
e-mail: ericfac@inet.ed.gov
WWW: http://ericfac.piccard.csc.com

EFF-088 (Rev. 2/2000)